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* * * * * Welcome to STN International * * * * *

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NEWS	2	APR 02	CAS Registry Number Crossover Limits Increased to 500,000 in Key STN Databases
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NEWS	4	APR 02	DWPI: New display format ALLSTR available
NEWS	5	APR 02	New Thesaurus Added to Derwent Databases for Smooth Sailing through U.S. Patent Codes
NEWS	6	APR 02	EMBASE Adds Unique Records from MEDLINE, Expanding Coverage back to 1948
NEWS	7	APR 07	50,000 World Traditional Medicine (WTM) Patents Now Available in CAplus
NEWS	8	APR 07	MEDLINE Coverage Is Extended Back to 1947
NEWS	9	JUN 16	WPI First View (File WPIFV) will no longer be available after July 30, 2010
NEWS	10	JUN 18	DWPI: New coverage - French Granted Patents
NEWS	11	JUN 18	CAS and FIZ Karlsruhe announce plans for a new STN platform
NEWS	12	JUN 18	IPC codes have been added to the INSPEC backfile (1969-2009)
NEWS	13	JUN 21	Removal of Pre-IPC 8 data fields streamline displays in CA/Caplus, CASREACT, and MARPAT
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NEWS	16	JUN 29	Enhanced Batch Search Options in DGENE, USGENE, and PCTGEN
NEWS	17	JUL 19	Enhancement of citation information in INPADOC databases provides new, more efficient competitor analyses
NEWS	18	JUL 26	CAS coverage of global patent authorities has expanded to 61 with the addition of Costa Rica
NEWS	19	SEP 15	MEDLINE Cited References provide additional relevant records with no additional searching.
NEWS	20	OCT 04	Removal of Pre-IPC 8 data fields streamlines displays in USPATFULL, USPAT2, and USPATOLD.
NEWS	21	OCT 04	Precision of EMBASE searching enhanced with new chemical name field
NEWS	22	OCT 06	Increase your retrieval consistency with new formats or for Taiwanese application numbers in CA/Caplus.
NEWS	23	OCT 21	CA/Caplus kind code changes for Chinese patents increase consistency, save time
NEWS	24	OCT 22	New version of STN Viewer preserves custom

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NEWS 26 NOV 03 New format for Korean patent application numbers in CA/CAPLUS increases consistency, saves time.

NEWS 27 NOV 04 Selected STN databases scheduled for removal on December 31, 2010

NEWS 28 NOV 18 PROUSDDR and SYNTHLINE Scheduled for Removal December 31, 2010 by Request of Prous Science

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NEWS EXPRESS FEBRUARY 15 10 CURRENT WINDOWS VERSION IS V8.4.2,
AND CURRENT DISCOVER FILE IS DATED 07 JULY 2010.

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* * * * * STN Columbus * * * * *

FILE 'HOME' ENTERED AT 12:35:52 ON 17 DEC 2010

=> file medline embase biosis

COST IN U.S. DOLLARS	SINCE FILE ENTRY	TOTAL SESSION
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FILE 'MEDLINE' ENTERED AT 12:36:12 ON 17 DEC 2010

FILE 'EMBASE' ENTERED AT 12:36:12 ON 17 DEC 2010
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FILE 'BIOSIS' ENTERED AT 12:36:12 ON 17 DEC 2010
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=> s (rivastigmine or galanthamine or lycoramine)
L1 7153 (RIVASTIGMINE OR GALANTHAMINE OR LYCORAMINE)

=> s l1 and ((delay?)(S)(release?) or (program?)(S)(release?))
L2 13 L1 AND ((DELAY?)(S)(RELEASE?) OR (PROGRAM?)(S)(RELEASE?))

=> dup rem l2
PROCESSING COMPLETED FOR L2
L3 7 DUP REM L2 (6 DUPLICATES REMOVED)

=> d l3 1-7 ibib abs

L3 ANSWER 1 OF 7 MEDLINE on STN DUPLICATE 1
 ACCESSION NUMBER: 2009280454 MEDLINE
 DOCUMENT NUMBER: PubMed ID: 19370562
 TITLE: Rivastigmine for Alzheimer's disease.
 AUTHOR: Birks Jacqueline; Grimley Evans John; Iakovidou Vasso;
 Tsolaki Magda; Holt Francesca E
 CORPORATE SOURCE: Centre for Statistics in Medicine, University of Oxford,
 Wolfson College, Linton Road, Oxford, UK, OX2 6UD..
 jacqueline.birks@csm.ox.ac.uk
 SOURCE: Cochrane database of systematic reviews (Online), (2009)
 No. 2, pp. CD001191. Electronic Publication: 2009-04-15.
 Ref: 105
 Journal code: 100909747. E-ISSN: 1469-493X. L-ISSN:
 1361-6137.
 PUB. COUNTRY: England: United Kingdom
 DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)
 (META-ANALYSIS)
 General Review; (REVIEW)
 LANGUAGE: English
 FILE SEGMENT: Priority Journals
 ENTRY MONTH: 200906
 ENTRY DATE: Entered STN: 17 Apr 2009
 Last Updated on STN: 24 Jun 2009
 Entered Medline: 23 Jun 2009
 REFERENCE COUNT: 105 There are 105 cited references for this document.
 AB BACKGROUND: Alzheimer's disease (AD) is the commonest cause of dementia
 affecting older people. One of the therapeutic strategies aimed at
 ameliorating the clinical manifestations of Alzheimer's disease is to
 enhance cholinergic neurotransmission in relevant parts of the brain by
 the use of cholinesterase inhibitors to delay the breakdown of
 acetylcholine released into synaptic clefts. Tacrine, the first
 of the cholinesterase inhibitors to undergo extensive trials for this
 purpose, was associated with significant adverse effects including
 hepatotoxicity. Other cholinesterase inhibitors, including
 rivastigmine, with superior properties in terms of specificity of
 action and low risk of adverse effects, have now been introduced.
 Rivastigmine has received approval for use in 60 countries
 including all member states of the European Union and the USA.
 OBJECTIVES: To determine the clinical efficacy and safety of
 rivastigmine for patients with dementia of Alzheimer's type.
 SEARCH STRATEGY: The Specialized Register of the Cochrane Dementia and
 Cognitive Improvement Group (CDCIG), The Cochrane Library, MEDLINE,
 EMBASE, PsycINFO, CINAHL and LILACS were searched on 27 March 2008 using
 the terms: Rivastigmine OR exelon OR ENA OR "SDZ ENA 713" . The
 CDCIG Specialized Register contains records from all major health care
 databases (The Cochrane Library, MEDLINE, EMBASE, PsycINFO, CINAHL,
 LILACS) as well as from many clinical trials registries and grey
 literature sources. SELECTION CRITERIA: All unconfounded, double-blind,
 randomized trials in which treatment with rivastigmine was
 administered to patients with dementia of the Alzheimer's type for more
 than two weeks and its effects compared with those of placebo in a
 parallel group of patients. DATA COLLECTION AND ANALYSIS: One reviewer
 (JSB) applied study selection criteria, assessed the quality of studies
 and extracted data. MAIN RESULTS: Nine trials, involving 4775
 participants, were included in the analyses. Use of rivastigmine
 in high doses was associated with statistically significant benefits on
 several measures. High-dose rivastigmine (6 to 12 mg daily) was
 associated with a two-point improvement in cognitive function on the
 ADAS-Cog score compared with placebo (weighted mean difference -1.99, 95%
 confidence interval -2.49 to -1.50, on an intention-to-treat basis) and a
 2.2 point improvement in activities of daily living assessed on the

Progressive Deterioration Scale (weighted mean difference -2.15, 95% confidence interval -3.16 to -1.13, on an intention-to-treat basis) at 26 weeks. At lower doses (4 mg daily or lower) differences were in the same direction but were statistically significant only for cognitive function. There were statistically significantly higher numbers of events of nausea, vomiting, diarrhoea, anorexia, headache, syncope, abdominal pain and dizziness among patients taking high-dose rivastigmine than among those taking placebo. There was some evidence that adverse events might be less common with more frequent, smaller doses of rivastigmine. The 2008 update includes a new study testing two types of rivastigmine transdermal patch, one delivering a higher dose than previously tested (17.4 mg/day) and a smaller patch delivering 9.6 mg/day. The efficacy of the smaller patch was not significantly different compared with the capsules of similar daily dose, but was associated with significantly fewer adverse events of nausea, vomiting, dizziness and asthenia. The efficacy of the larger patch was not significantly different compared with the smaller patch, but the smaller patch was associated with significantly fewer adverse events of nausea, vomiting, weight loss and dizziness. There appears to be advantages associated with the smaller patch compared with both the higher dose patch and the 6-12 mg/day capsules. AUTHORS' CONCLUSIONS: Rivastigmine appears to be beneficial for people with mild to moderate Alzheimer's disease. In comparisons with placebo, improvements were seen in the rate of decline of cognitive function, activities of daily living, and severity of dementia with daily doses of 6 to 12 mg. Adverse events were consistent with the cholinergic actions of the drug. A transdermal patch has been tested in one trial, and there is evidence that the lower dose smaller patch is associated with fewer side effects than the capsules or the higher dose larger patch and has comparable efficacy to both. This review has not examined economic data.

L3 ANSWER 2 OF 7 EMBASE COPYRIGHT (c) 2010 Elsevier B.V. All rights reserved on STN

ACCESSION NUMBER: 2009489290 EMBASE

TITLE: Rivastigmine for Alzheimer's disease.

AUTHOR: Birks, Jacqueline (correspondence)

CORPORATE SOURCE: Centre for Statistics in Medicine, University of Oxford, Wolfson College, Linton Road, Oxford, OX2 6UD, United Kingdom. jacqueline.birks@csm.ox.ac.uk

AUTHOR: Evans, John Grimley

CORPORATE SOURCE: Division of Clinical Geratology, Nuffield Department of Clinical Medicine, University of Oxford, Oxford, United Kingdom.

AUTHOR: Iakovidou, Vasso

AUTHOR: Tsolaki, Magda

CORPORATE SOURCE: 3rd Neurology Department, Aristotle University of Thessaloniki, Thessaloniki, Greece.

SOURCE: Cochrane Database of Systematic Reviews, (2009) No. 2. art. CD001191.
Refs: 174
ISSN: 1469-493X

PUBLISHER: John Wiley and Sons Ltd, Southern Gate, Chichester, West Sussex, PO19 8SQ, United Kingdom.

COUNTRY: United Kingdom

DOCUMENT TYPE: Journal; General Review; (Review)

FILE SEGMENT: 006 Internal Medicine
008 Neurology and Neurosurgery
020 Gerontology and Geriatrics
036 Health Policy, Economics and Management
037 Drug Literature Index
038 Adverse Reactions Titles

LANGUAGE: English

SUMMARY LANGUAGE: English

ENTRY DATE: Entered STN: 27 Oct 2009

Last Updated on STN: 27 Oct 2009

AB Background: Alzheimer's disease (AD) is the commonest cause of dementia affecting older people. One of the therapeutic strategies aimed at ameliorating the clinical manifestations of Alzheimer's disease is to enhance cholinergic neurotransmission in relevant parts of the brain by the use of cholinesterase inhibitors to delay the breakdown of acetylcholine released into synaptic clefts. Tacrine, the first of the cholinesterase inhibitors to undergo extensive trials for this purpose, was associated with significant adverse effects including hepatotoxicity. Other cholinesterase inhibitors, including rivastigmine, with superior properties in terms of specificity of action and low risk of adverse effects, have now been introduced. Rivastigmine has received approval for use in 60 countries including all member states of the European Union and the USA. Objectives: To determine the clinical efficacy and safety of rivastigmine for patients with dementia of Alzheimer's type. Search strategy: The Specialized Register of the Cochrane Dementia and Cognitive Improvement Group (CDCIG), The Cochrane Library, MEDLINE, EMBASE, PsycINFO, CINAHL and LILACS were searched on 27 March 2008 using the terms: Rivastigmine OR exelon OR ENA OR "SDZ ENA 713" . The CDCIG Specialized Register contains records from all major health care databases (The Cochrane Library, MEDLINE, EMBASE, PsycINFO, CINAHL, LILACS) as well as from many clinical trials registries and grey literature sources. Selection criteria: All unconfounded, double-blind, randomized trials in which treatment with rivastigmine was administered to patients with dementia of the Alzheimer's type for more than two weeks and its effects compared with those of placebo in a parallel group of patients. Data collection and analysis: One reviewer (JSB) applied study selection criteria, assessed the quality of studies and extracted data. Main results: Nine trials, involving 4775 participants, were included in the analyses. Use of rivastigmine in high doses was associated with statistically significant benefits on several measures. High-dose rivastigmine (6 to 12 mg daily) was associated with a two-point improvement in cognitive function on the ADAS-Cog score compared with placebo (weighted mean difference -1.99, 95% confidence interval -2.49 to -1.50, on an intention-to-treat basis) and a 2.2 point improvement in activities of daily living assessed on the Progressive Deterioration Scale (weighted mean difference -2.15, 95% confidence interval -3.16 to -1.13, on an intention-to-treat basis) at 26 weeks. At lower doses (4 mg daily or lower) differences were in the same direction but were statistically significant only for cognitive function. There were statistically significantly higher numbers of events of nausea, vomiting, diarrhoea, anorexia, headache, syncope, abdominal pain and dizziness among patients taking high-dose rivastigmine than among those taking placebo. There was some evidence that adverse events might be less common with more frequent, smaller doses of rivastigmine. The 2008 update includes a new study testing two types of rivastigmine transdermal patch, one delivering a higher dose than previously tested (17.4 mg/day) and a smaller patch delivering 9.6 mg/day. The efficacy of the smaller patch was not significantly different compared with the capsules of similar daily dose, but was associated with significantly fewer adverse events of nausea, vomiting, dizziness and asthenia. The efficacy of the larger patch was not significantly different compared with the smaller patch, but the smaller patch was associated with significantly fewer adverse events of nausea, vomiting, weight loss and dizziness. There appears to be advantages associated with the smaller patch compared with both the higher dose patch and the 6-12 mg/day capsules. Authors' conclusions: Rivastigmine appears to be beneficial for people with mild to moderate Alzheimer's disease. In comparisons with placebo, improvements were seen in the rate

of decline of cognitive function, activities of daily living, and severity of dementia with daily doses of 6 to 12 mg. Adverse events were consistent with the cholinergic actions of the drug. A transdermal patch has been tested in one trial, and there is evidence that the lower dose smaller patch is associated with fewer side effects than the capsules or the higher dose larger patch and has comparable efficacy to both. This review has not examined economic data. Copyright .COPYRGT. 2009 The Cochrane Collaboration. Published by John Wiley & Sons, Ltd.

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ACCESSION NUMBER: 0018041108 EMBASE
COPYRIGHT: MEDLINE® is the source for the citation and abstract of this record.
TITLE: A nanoparticulate drug-delivery system for rivastigmine: physico-chemical and in vitro biological characterization..
AUTHOR: Craparo, Emanuela Fabiola (correspondence); Pitarresi, Giovanna; Bondi, Maria Luisa; Casaletto, Maria Pia; Licciardi, Mariano; Giammona, Gaetano
CORPORATE SOURCE: Dipartimento di Chimica e Tecnologie Farmaceutiche, Universita degli Studi di Palermo, via Archirafi, 32-90123 Palermo, Italy.. ema.craparo@unipa.it
SOURCE: Macromolecular bioscience, (10 Mar 2008) Vol. 8, No. 3, pp. 247-259.
E-ISSN: 1616-5195
COUNTRY: Germany
DOCUMENT TYPE: Journal; Article
FILE SEGMENT: MEDLINE
LANGUAGE: English
ENTRY DATE: Entered STN: Mar 2010
Last Updated on STN: Mar 2010

AB The preparation and characterization of surface-PEGylated polymeric nanoparticles are described. These systems were obtained by UV irradiation of PHM and PHM-PEG(2000) as an inverse microemulsion, using an aqueous solution of the PHM/PHM-PEG(2000) copolymer mixture as the internal phase and triacetin saturated with water as the external phase, and characterized by dimensional analysis, zeta-potential measurements and XPS. in vitro biological tests demonstrated their cell compatibility and their ability to escape from phagocytosis. Rivastigmine was encapsulated into the nanoparticle structure and drug-release profiles from loaded samples were investigated in PBS at pH = 7.4 and human plasma.

L3 ANSWER 4 OF 7 MEDLINE on STN DUPLICATE 2

ACCESSION NUMBER: 2007499807 MEDLINE
DOCUMENT NUMBER: PubMed ID: 17692343
TITLE: VRX-03011, a novel 5-HT4 agonist, enhances memory and hippocampal acetylcholine efflux.
AUTHOR: Mohler Eric G; Shacham Sharon; Noiman Silvia; Lezoualc'h Frank; Robert Sylvain; Gastineau Monique; Rutkowski Joseph; Marantz Yael; Dumuis Aline; Bockaert Joel; Gold Paul E; Ragozzino Michael E
CORPORATE SOURCE: Department of Psychology, University of Illinois at Chicago, Chicago, IL 60607, USA.
SOURCE: Neuropharmacology, (2007 Sep) Vol. 53, No. 4, pp. 563-73.
Electronic Publication: 2007-06-30.
Journal code: 0236217. ISSN: 0028-3908. L-ISSN: 0028-3908.
PUB. COUNTRY: England; United Kingdom
DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)
(RESEARCH SUPPORT, NON-U.S. GOV'T)
LANGUAGE: English
FILE SEGMENT: Priority Journals

ENTRY MONTH: 200712
ENTRY DATE: Entered STN: 28 Aug 2007
Last Updated on STN: 21 Dec 2007
Entered Medline: 20 Dec 2007

AB Recent evidence suggests that 5-hydroxytryptamine (5-HT)(4) receptor activity enhances cognition and provides neuroprotection. Here we report the effects of VRX-03011, a novel partial 5-HT(4) agonist, that is both potent ($K(i)$ approximately 30 nM) and highly selective ($K(i) > 5$ microM for all other 5-HT receptors tested). In separate experiments, rats received VRX-03011 (0.1-10 mg/kg i.p.) 30 min prior to spontaneous alternation testing in a no-delay or a 30-s delay condition. VRX-03011 (1, 5 and 10 mg/kg, but not 0.1 mg/kg) significantly enhanced delayed spontaneous alternation performance while none of the doses enhanced performance in the no-delay test. VRX-03011 (1 and 5 mg/kg) concomitantly enhanced hippocampal acetylcholine output and delayed spontaneous alternation scores compared to that of vehicle controls, but had no effect on hippocampal acetylcholine release under a resting condition. Moreover, suboptimal doses of VRX-03011 and the acetylcholinesterase inhibitor galanthamine combined to enhance memory. VRX-03011 also regulated amyloid precursor protein (APP) metabolism by inducing a concentration-dependent increase in the non-amyloidogenic soluble form of APP (sAPP α) with an EC(50) approximately 1--10 nM. VRX-03011 had no effect on contractile properties in guinea pig ileum or colon preparations with an EC(50) > 10 microM and did not alter rat intestinal transit at doses up to 10 mg/kg. These findings suggest that VRX-03011 may represent a novel treatment for Alzheimer's disease that reduces cognitive impairments and provides neuroprotection without gastrointestinal side effects.

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ACCESSION NUMBER: 2007441356 EMBASE
TITLE: Apathy and its treatment.
AUTHOR: Roth, Robert M.; Flashman, Laura A., Dr. (correspondence); McAllister, Thomas W.
CORPORATE SOURCE: Department of Psychiatry, Dartmouth-Hitchcock Medical Center, One Medical Center Drive, Lebanon, NH 03756, United States. laura.flashman@dartmouth.edu
SOURCE: Current Treatment Options in Neurology, (Sep 2007) Vol. 9, No. 5, pp. 363-370.
Refs: 45
ISSN: 1092-8480 CODEN: CTONBT
COUNTRY: United Kingdom
DOCUMENT TYPE: Journal; General Review; (Review)
FILE SEGMENT: 032 Psychiatry
037 Drug Literature Index
008 Neurology and Neurosurgery
LANGUAGE: English
SUMMARY LANGUAGE: English
ENTRY DATE: Entered STN: 2 Oct 2007
Last Updated on STN: 2 Oct 2007

AB Apathy is a common problem observed in numerous neurologic, psychiatric, and other medical conditions. It is independent from other symptoms and has been associated with a variety of negative outcomes. However, little empirical research has been conducted on potential psychologic or pharmacologic treatments for apathy. The impact of several different medications has been investigated, but very few reports have used well-controlled study designs. At present, agents that potentiate dopamine release and/or delay dopamine reuptake in the central nervous system appear promising for use in apathy. Among these, atypical antipsychotics and methylphenidate have received the greatest attention, and both have been demonstrated to reduce apathy in several

patient populations. These findings appear consistent with evidence supporting a role for frontal-subcortical circuitry abnormality in the etiology of apathy. Another class of medication that has been the subject of a larger number of investigations is the acetylcholinesterase inhibitors. These have been reported to reduce apathy in patients with dementia and individuals with traumatic brain injury. Several psychologic interventions have been assessed, largely in geriatric populations, but most have been the subject of only one or a very small number of studies. With this caveat, interventions that have shown promise include participation in discussion groups and cognitive stimulation. Despite some promising findings, further large-scale, well-controlled clinical trials of potentially helpful pharmacologic and psychologic interventions for apathy are essential before any firm recommendations can be made. In the interim, careful evaluation of possible psychosocial and biological contributors to apathy in any given patient is suggested, with treatment planning based accordingly. Copyright .COPYRGT. 2007 by Current Medicine Group LLC.

L3 ANSWER 6 OF 7 MEDLINE on STN DUPLICATE 3
 ACCESSION NUMBER: 2001377186 MEDLINE
 DOCUMENT NUMBER: PubMed ID: 11034705
 TITLE: Rivastigmine for Alzheimer's disease.
 AUTHOR: Birks J; Grimley Evans J; Iakovidou V; Tsolaki M
 CORPORATE SOURCE: Department of Clinical Geratology, University of Oxford, Oxford, UK, OX2 6HE.. jacqueline.birks@geratology.ox.ac.uk
 SOURCE: Cochrane database of systematic reviews (Online), (2000) No. 4, pp. CD001191. Ref: 37
 Journal code: 100909747. E-ISSN: 1469-493X. L-ISSN: 1361-6137.
 PUB. COUNTRY: England: United Kingdom
 DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)
 General Review; (REVIEW)
 LANGUAGE: English
 FILE SEGMENT: Priority Journals
 ENTRY MONTH: 200108
 ENTRY DATE: Entered STN: 6 Aug 2001
 Last Updated on STN: 6 Aug 2001
 Entered Medline: 2 Aug 2001
 REFERENCE COUNT: 37 There are 37 cited references for this document.
 AB BACKGROUND: Alzheimer's disease (AD) is the commonest cause of dementia affecting older people. One of the therapeutic strategies aimed at ameliorating the clinical manifestations of Alzheimer's disease is to enhance cholinergic neurotransmission in relevant parts of the brain by the use of cholinesterase inhibitors to delay the breakdown of acetylcholine released into synaptic clefts. Tacrine, the first of the cholinesterase inhibitors to undergo extensive trials for this purpose, was associated with significant adverse effects including hepatotoxicity. Several other cholinesterase inhibitors, including rivastigmine, with superior properties in terms of specificity of action and low risk of adverse effects, have now been introduced. Rivastigmine has received approval for use in 60 countries including all member States of the European Union and the USA.
 OBJECTIVES: To determine the clinical efficacy and safety of rivastigmine for patients with dementia of Alzheimer's type.
 SEARCH STRATEGY: The Cochrane Controlled Trials Register (April 2000) the Cochrane Dementia and Cognitive Improvement Group Register of Clinical Trials (July 2000), other electronic databases and other sources of reports were searched. SELECTION CRITERIA: All unconfounded, double-blind, randomized trials in which treatment with rivastigmine was administered to patients with dementia of the Alzheimer's type for more than two weeks and its effects compared with those of placebo in a parallel group of patients. DATA COLLECTION AND

ANALYSIS: One reviewer (JSB) applied study selection criteria, assessed the quality of studies and extracted data. MAIN RESULTS: Seven trials, involving 3370 participants, were included. Use of rivastigmine in high doses was associated with statistically significant benefits on several measures. High-dose rivastigmine (6 to 12 mg daily) was associated with a 2.1 point improvement in cognitive function on the ADAS-Cog score compared with placebo (weighted mean difference -2.09, 95% confidence interval -2.65 to -1.54, on an intention-to-treat basis) and a 2.2 point improvement in activities of daily living assessed on the Progressive Deterioration Scale (weighted mean difference -2.15, 95% confidence interval -3.16 to -1.13, on an intention-to-treat basis) at 26 weeks. Fewer patients were graded as having severe dementia at 26 weeks (55% of patients taking rivastigmine compared with 59% on placebo; odds ratio 0.78, 95% confidence interval 0.64 to 0.94). At lower doses (4 mg daily or lower) differences were in the same direction but were statistically significant only for cognitive function. There were statistically significantly higher numbers of events of nausea, vomiting, diarrhoea, anorexia, headache, syncope, abdominal pain and dizziness among patients taking high-dose rivastigmine than among those taking placebo. There was some evidence that adverse events might be less common with more frequent, smaller doses of rivastigmine. REVIEWER'S CONCLUSIONS: Rivastigmine appears to be beneficial for people with mild to moderate Alzheimer's disease. In comparisons with placebo, improvements were seen in cognitive function, activities of daily living, and severity of dementia with daily doses of 6 to 12 mg. Adverse events were consistent with the cholinergic actions of the drug. Further research is desirable on dosage (frequency and quantity) in a search for ways to minimize adverse effects. This review has not examined economic data.

L3 ANSWER 7 OF 7 MEDLINE on STN DUPLICATE 4
 ACCESSION NUMBER: 1999238946 MEDLINE
 DOCUMENT NUMBER: PubMed ID: 10222440
 TITLE: Further studies on Nivalin P-induced changes in muscle fiber membrane processes.
 AUTHOR: Radicheva N; Mileva K; Stoyanova N; Georgieva B
 CORPORATE SOURCE: Institute of Biophysics, Bulgarian Academy of Sciences, Sofia, Bulgaria.
 SOURCE: Methods and findings in experimental and clinical pharmacology, (1999 Jan-Feb) Vol. 21, No. 1, pp. 5-10. Journal code: 7909595. ISSN: 0379-0355. L-ISSN: 0379-0355.
 PUB. COUNTRY: Spain
 DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE) (RESEARCH SUPPORT, NON-U.S. GOV'T)
 LANGUAGE: English
 FILE SEGMENT: Priority Journals
 ENTRY MONTH: 199906
 ENTRY DATE: Entered STN: 12 Jul 1999
 Last Updated on STN: 12 Jul 1999
 Entered Medline: 22 Jun 1999

AB Nivalin P, composed of Nivalin (galanthamine hydrobromide) and Pymadin (4-aminopyridine hydrochloride), was applied extracellularly to isolated skeletal muscle fibers during prolonged activity (fatiguing) to better understand the effects of the drug on membrane ionic processes. Changes in intracellular action potential (ICAP) and twitch (Tw) parameters were monitored from treated and untreated fibers during uninterrupted activity (endurance time, ET) produced by repetitive stimulation every 200 msec for 3 min. Nivalin P-induced a shortening of the ET, drastic changes in repolarization of the ICAP corresponding to changes in negative afterpotential and falling area and an initial increase of the Tw amplitude and duration. These results suggest that Nivalin P: (i) inhibits the Na⁺, K⁺-pump due to nonspecific reduction of Na⁺ influx, stimulates the Na⁺-Ca²⁺ exchanger and inhibits K⁺

conductance; (ii) increases Ca²⁺ release and delays Ca²⁺ uptake under sufficient depolarization. It was concluded that fatigue develops faster in the presence of Nivalin P.

=> d his

(FILE 'HOME' ENTERED AT 12:35:52 ON 17 DEC 2010)

FILE 'MEDLINE, EMBASE, BIOSIS' ENTERED AT 12:36:12 ON 17 DEC 2010

L1 7153 S (RIVASTIGMINE OR GALANTHAMINE OR LYCORAMINE)
L2 13 S L1 AND ((DELAY?)(S)(RELEASE?) OR (PROGRAM?)(S)(RELEASE?))
L3 7 DUP REM L2 (6 DUPLICATES REMOVED)

=> file caplus

COST IN U.S. DOLLARS	SINCE FILE ENTRY	TOTAL SESSION
FULL ESTIMATED COST	19.44	19.66

FILE 'CAPLUS' ENTERED AT 12:38:56 ON 17 DEC 2010

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FILE COVERS 1907 - 17 Dec 2010 VOL 153 ISS 26

FILE LAST UPDATED: 16 Dec 2010 (20101216/ED)

REVISED CLASS FIELDS (/NCL) LAST RELOADED: Aug 2010

USPTO MANUAL OF CLASSIFICATIONS THESAURUS ISSUE DATE: Aug 2010

Caplus now includes complete International Patent Classification (IPC) reclassification data for the fourth quarter of 2010.

CAS Information Use Policies apply and are available at:

<http://www.cas.org/legal/infopolicy.html>

This file contains CAS Registry Numbers for easy and accurate substance identification.

=> s (rivastigmine or galanthamine or lycoramine)

1025 RIVASTIGMINE
1235 GALANTHAMINE
20 GALANTHAMINES
1237 GALANTHAMINE
(GALANTHAMINE OR GALANTHAMINES)
131 LYCORAMINE
3 LYCORAMINES
131 LYCORAMINE
(LYCORAMINE OR LYCORAMINES)

L4 2240 (RIVASTIGMINE OR GALANTHAMINE OR LYCORAMINE)

```
=> s 14 and ((delay?)(S)(release?) or (program?)(S)(release?))
230329 DELAY?
770326 RELEASE?
6561 (DELAY?)(S)(RELEASE?)
436814 PROGRAM?
770326 RELEASE?
3097 (PROGRAM?)(S)(RELEASE?)
L5 11 L4 AND ((DELAY?)(S)(RELEASE?) OR (PROGRAM?)(S)(RELEASE?))
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```
=> dup rem 15
PROCESSING COMPLETED FOR L5
L6 11 DUP REM L5 (0 DUPLICATES REMOVED)
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=> d 16 1-11 ibib abs
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L6 ANSWER 1 OF 11 CAPLUS COPYRIGHT 2010 ACS on STN
ACCESSION NUMBER: 2009:1401352 CAPLUS
DOCUMENT NUMBER: 151:537048
TITLE: Pharmaceutical comprising galanthamine
having controlled release
INVENTOR(S): Muskulus, Frank; Paetz, Jana
PATENT ASSIGNEE(S): Ratiopharm G.m.b.H., Germany
SOURCE: PCT Int. Appl., 24pp.; Chemical Indexing Equivalent to
151:537025 (EP)
CODEN: PIXXD2
DOCUMENT TYPE: Patent
LANGUAGE: German
FAMILY ACC. NUM. COUNT: 2
PATENT INFORMATION:
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PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2009135623	A1	20091112	WO 2009-EP3146	20090430
W:	AE, AG, AL, AM, AO, AT, AU, AZ, BA, BB, BG, BH, BR, BW, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DO, DZ, EC, EE, EG, ES, FI, GB, GD, GE, GH, GM, GT, HN, HR, HU, ID, IL, IN, IS, JP, KE, KG, KM, KN, KP, KR, KZ, LA, LC, LK, LR, LS, LT, LU, LY, MA, MD, ME, MG, MK, MN, MW, MX, MY, MZ, NA, NG, NI, NO, NZ, OM, PG, PH, PL, PT, RO, RS, RU, SC, SD, SE, SG, SK, SL, SM, ST, SV, SY, TJ, TM, TN, TR, TT, TZ, UA, UG, US, UZ, VC, VN, ZA, ZM, ZW			
RW:	AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, HR, HU, IE, IS, IT, LT, LU, LV, MC, MK, MT, NL, NO, PL, PT, RO, SE, SI, SK, TR, BF, BJ, CF, CG, CI, CM, GA, GN, GQ, GW, ML, MR, NE, SN, TD, TG, BW, GH, GM, KE, LS, MW, MZ, NA, SD, SL, SZ, TZ, UG, ZM, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM			
EP 2116232	A1	20091111	EP 2008-8779	20080509
R:	AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, HR, HU, IE, IS, IT, LI, LT, LU, LV, MC, MT, NL, NO, PL, PT, RO, SE, SI, SK, TR, AL, BA, MK, RS			

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PRIORITY APPLN. INFO.: EP 2008-8779 A 20080509
AB The invention relates to a pharmaceutical for the oral administration of
the active ingredient galanthamine, comprising pellets and at
least one tablet, wherein the pellets comprise an inert core and at least
a coating comprising the active ingredient that releases the active
ingredient in an extended manner and the tablet quickly releases the
active ingredient. Thus a delayed-release pellet
contained (mg): galanthamine hydrobromide 7.8; triethylcellulose
6.1; Aquacoat ECD 33; Cellets 500 37.5. An instant-release tablet
included (mg): galanthamine hydrobromide 2.6; Avicel PH 102
11.4; Tablettose 80 15.4; Kollidone VA 64 1.6; Explotab 1.3; magnesium
stearate 0.3. One pellet and one tablet were encapsulated in a hard
gelatin capsule; dissoln. of the drug was tested.
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REFERENCE COUNT: 5 THERE ARE 5 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L6 ANSWER 2 OF 11 CAPLUS COPYRIGHT 2010 ACS on STN
ACCESSION NUMBER: 2009:1388057 CAPLUS
DOCUMENT NUMBER: 151:537025
TITLE: Pharmaceutical comprising galanthamine
having controlled release
INVENTOR(S): Muskulus, Frank; Paetz, Jana
PATENT ASSIGNEE(S): Ratiopharm GmbH, Germany
SOURCE: Eur. Pat. Appl., 13pp.; Chemical Indexing Equivalent
to 151:537048 (WO)
CODEN: EPXXDW
DOCUMENT TYPE: Patent
LANGUAGE: German
FAMILY ACC. NUM. COUNT: 2
PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
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EP 2116232	A1	20091111	EP 2008-8779	20080509
R: AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, HR, HU, IE, IS, IT, LI, LT, LU, LV, MC, MT, NL, NO, PL, PT, RO, SE, SI, SK, TR, AL, BA, MK, RS				
WO 2009135623	A1	20091112	WO 2009-EP3146	20090430
W: AE, AG, AL, AM, AO, AT, AU, AZ, BA, BB, BG, BH, BR, BW, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DO, DZ, EC, EE, EG, ES, FI, GB, GD, GE, GH, GM, GT, HN, HR, HU, ID, IL, IN, IS, JP, KE, KG, KM, KN, KP, KR, KZ, LA, LC, LK, LR, LS, LT, LU, LY, MA, MD, ME, MG, MK, MN, MW, MX, MY, MZ, NA, NG, NI, NO, NZ, OM, PG, PH, PL, PT, RO, RS, RU, SC, SD, SE, SG, SK, SL, SM, ST, SV, SY, TJ, TM, TN, TR, TT, TZ, UA, UG, US, UZ, VC, VN, ZA, ZM, ZW				
RW: AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, HR, HU, IE, IS, IT, LT, LU, LV, MC, MK, MT, NL, NO, PL, PT, RO, SE, SI, SK, TR, BF, BJ, CF, CG, CI, CM, GA, GN, GQ, GW, ML, MR, NE, SN, TD, TG, BW, GH, GM, KE, LS, MW, MZ, NA, SD, SL, SZ, TZ, UG, ZM, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM				

PRIORITY APPLN. INFO.: EP 2008-8779 A 20080509
AB The invention relates to a pharmaceutical for the oral administration of the active ingredient galanthamine, comprising pellets and at least one tablet, wherein the pellets comprise an inert core and at least a coating comprising the active ingredient that releases the active ingredient in an extended manner and the tablet quickly releases the active ingredient. Thus a delayed-release pellet contained (mg): galanthamine hydrobromide 7.8; triethylcellulose 6.1; Aquacoat ECD 33; Cellets 500 37.5. An instant-release tablet included (mg): galanthamine hydrobromide 2.6; Avicel PH 102 11.4; Tablettose 80 15.4; Kollidone VA 64 1.6; Explotab 1.3; magnesium stearate 0.3. One pellet and one tablet were encapsulated in a hard gelatin capsule; dissoln. of the drug was tested.

REFERENCE COUNT: 5 THERE ARE 5 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L6 ANSWER 3 OF 11 CAPLUS COPYRIGHT 2010 ACS on STN
ACCESSION NUMBER: 2008:1338451 CAPLUS
DOCUMENT NUMBER: 149:541636
TITLE: Combination pharmaceutical compositions comprising minicapsules or minispheres of, for example, nimodipine and tacrolimus
INVENTOR(S): Coulter, Ivan
PATENT ASSIGNEE(S): Sigmoid Pharma Ltd., Ire.
SOURCE: PCT Int. Appl., 109pp.

CODEN: PIXXD2
DOCUMENT TYPE: Patent
LANGUAGE: English
FAMILY ACC. NUM. COUNT: 2
PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2008132712	A2	20081106	WO 2008-IE53	20080501
WO 2008132712	A3	20100218		
W:	AE, AG, AL, AM, AO, AT, AU, AZ, BA, BB, BG, BH, BR, BW, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DO, DZ, EC, EE, EG, ES, FI, GB, GD, GE, GH, GM, GT, HN, HR, HU, ID, IL, IN, IS, JP, KE, KG, KM, KN, KP, KR, KZ, LA, LC, LK, LR, LS, LT, LU, LY, MA, MD, ME, MG, MK, MN, MW, MX, MY, MZ, NA, NG, NI, NO, NZ, OM, PG, PH, PL, PT, RO, RS, RU, SC, SD, SE, SG, SK, SL, SM, SV, SY, TJ, TM, TN, TR, TT, TZ, UA, UG, US, UZ, VC, VN, ZA, ZM, ZW			
RW:	AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, HR, HU, IE, IS, IT, LT, LU, LV, MC, MT, NL, NO, PL, PT, RO, SE, SI, SK, TR, BF, BJ, CF, CG, CI, CM, GA, GN, GQ, GW, ML, MR, NE, SN, TD, TG, BW, GH, GM, KE, LS, MW, MZ, NA, SD, SL, SZ, TZ, UG, ZM, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM, AP, EA, EP, OA			
CA 2685593	A1	20081106	CA 2008-2685593	20080501
EP 2063875	A2	20090603	EP 2008-738144	20080501
R:	AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, HR, HU, IE, IS, IT, LI, LT, LU, LV, MC, MT, NL, NO, PL, PT, RO, SE, SI, SK, TR, AL, BA, MK, RS			
JP 2010526054	T	20100729	JP 2010-504995	20080501
IN 2009DN07065	A	20100625	IN 2009-DN7065	20091103
US 20100215737	A1	20100826	US 2010-598386	20100430
PRIORITY APPLN. INFO.:			US 2007-924132P	P 20070501
			WO 2008-IE53	W 20080501

AB A modified release dosage product is provided, comprising a plurality of minicapsules or minispheres containing various active agents, for example, a calcium channel blocker, such as nimodipine, and/or a calcineurin inhibitor, such as tacrolimus. Uncoated minicapsules or minispheres encapsulating micronized nimodipine for immediate release and a controlled release polymer coated minicapsule or minisphere encapsulating micronized nimodipine for delayed, sustained, controlled or targeted release are described. Uncoated seamless minicapsules, the core of which comprise tacrolimus lipid-based formulation for immediate release and a controlled release polymer coated seamless minicapsule, the core of which comprises tacrolimus lipid-based formulation for delayed, sustained, controlled release or targeted release are also described. The final dosage form may be a hard gelatin capsule. Thus, nimodipine multiparticulate seamless minicapsules were produced containing nimodipine 37.5%, gelatin 56.3% and sorbitol 6.3%, and some of the minicapsules were coated with Surelease. Tacrolimus minicapsules were also produced comprising a core containing tacrolimus 3.25%, Labrafil 36.4%, olive oil 47.65%, and ethanol 12.7%, and a shell containing gelatin 90.0% and sorbitol 10.0%, and some of the minicapsules were first coated with Eudragit RS30D followed by Eudragit FS30D. The uncoated and coated nimodipine minicapsules and uncoated and coated tacrolimus minicapsules were blended into the final dosage form.

OS.CITING REF COUNT: 1 THERE ARE 1 CAPLUS RECORDS THAT CITE THIS RECORD (1 CITINGS)

L6 ANSWER 4 OF 11 CAPLUS COPYRIGHT 2010 ACS on STN

ACCESSION NUMBER: 2008:973968 CAPLUS

DOCUMENT NUMBER: 149:267763

TITLE: Carbamate compounds that inhibit cholinesterase and

INVENTOR(S): their preparation and use in the treatment of diseases
 Rupniak, Nadia M. J.; White, James F.; Shiosaki,
 Kazumi; Leander, J. David; Du, Shoucheng; Coughlin,
 Daniel J.

PATENT ASSIGNEE(S): Colucid Pharmaceuticals, Inc., USA

SOURCE: PCT Int. Appl., 120 pp.
 CODEN: PIXXD2

DOCUMENT TYPE: Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 1

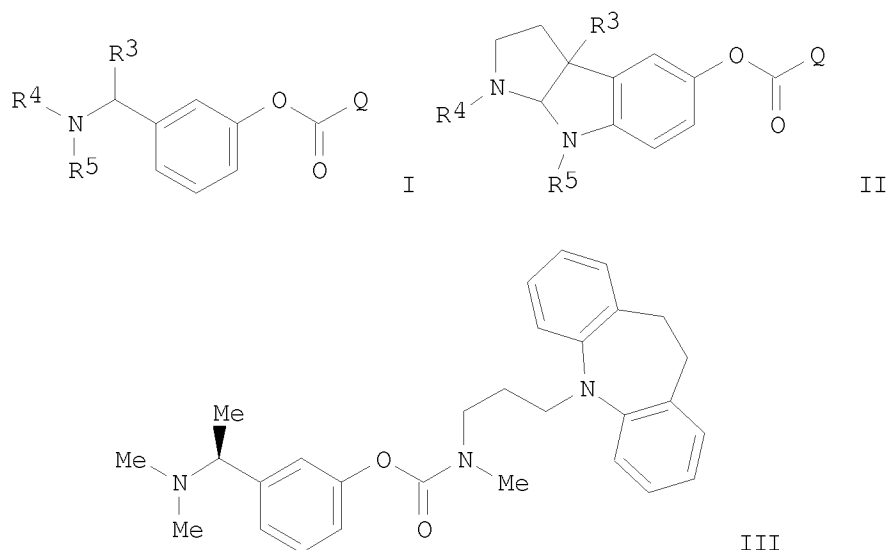
PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2008097546	A2	20080814	WO 2008-US1516	20080204
WO 2008097546	A3	20090115		
W:	AE, AG, AL, AM, AO, AT, AU, AZ, BA, BB, BG, BH, BR, BW, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DO, DZ, EC, EE, EG, ES, FI, GB, GD, GE, GH, GM, GT, HN, HR, HU, ID, IL, IN, IS, JP, KE, KG, KM, KN, KP, KR, KZ, LA, LC, LK, LR, LS, LT, LU, LY, MA, MD, ME, MG, MK, MN, MW, MX, MY, MZ, NA, NG, NI, NO, NZ, OM, PG, PH, PL, PT, RO, RS, RU, SC, SD, SE, SG, SK, SL, SM, SV, SY, TJ, TM, TN, TR, TT, TZ, UA, UG, US, UZ, VC, VN, ZA, ZM, ZW			
RW:	AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, HR, HU, IE, IS, IT, LT, LU, LV, MC, MT, NL, NO, PL, PT, RO, SE, SI, SK, TR, BF, BJ, CF, CG, CI, CM, GA, GN, GQ, GW, ML, MR, NE, SN, TD, TG, BW, GH, GM, KE, LS, MW, MZ, NA, SD, SL, SZ, TZ, UG, ZM, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM, AP, EA, EP, OA			
AU 2008214380	A1	20080814	AU 2008-214380	20080204
AU 2008214380	A2	20090924		
CA 2677241	A1	20080814	CA 2008-2677241	20080204
US 20080261950	A1	20081023	US 2008-12636	20080204
EP 2125709	A2	20091202	EP 2008-725187	20080204
R:	AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, HR, HU, IE, IS, IT, LI, LT, LU, LV, MC, MT, NL, NO, PL, PT, RO, SE, SI, SK, TR			
JP 2010518010	T	20100527	JP 2009-548336	20080204
MX 2009008288	A	20091201	MX 2009-8288	20090803
IN 2009KN03035	A	20100820	IN 2009-KN3035	20090826
CN 101631770	A	20100120	CN 2008-80007756	20090909
PRIORITY APPLN. INFO.:			US 2007-899111P	P 20070202
			US 2007-959901P	P 20070716
			WO 2008-US1516	W 20080204

ASSIGNMENT HISTORY FOR US PATENT AVAILABLE IN LSUS DISPLAY FORMAT

OTHER SOURCE(S): MARPAT 149:267763

GI



AB Compds. of formula I and II that inhibit cholinesterase activity and, upon hydrolysis release a pharmacol. active agent. The pharmacol. active agent obtained by hydrolysis of the carbamate compound can treat, for example, a nervous system condition, cholinergic deficiency and condition or diseases associated with a deficiency in a pharmacol. active agent, such as acetylcholine. Compds. of formula I and II wherein Q is substituted amino group; R3, R4 and R5 are independently unsubstituted alkyl and H; and their pharmaceutically acceptable salts thereof, are claimed. Example compound III was prepared by carbonylation of (S)-N,N-dimethyl-1-(3-hydroxyphenyl)ethylamine followed by amidation with desipramine. All the invention compds. were evaluated for their cholinesterase inhibitory activity. From the assay, it was determined that compound III exhibited IC50 value of 0.2 nM.

L6 ANSWER 5 OF 11 CAPLUS COPYRIGHT 2010 ACS on STN

ACCESSION NUMBER: 2007:952197 CAPLUS

DOCUMENT NUMBER: 147:462005

TITLE: VRX-03011, a novel 5-HT4 agonist, enhances memory and hippocampal acetylcholine efflux

AUTHOR(S) : Mohler, Eric G.; Shacham, Sharon; Noiman, Silvia; Lezoualc'h, Frank; Robert, Sylvain; Gastineau, Monique; Rutkowski, Joseph; Marantz, Yael; Dumuis, Aline; Bockaert, Joel; Gold, Paul E.; Ragozzino, Michael E.

CORPORATE SOURCE: Department of Psychology, University of Illinois at Chicago, Chicago, IL, 60607, USA

SOURCE: *Neuropharmacology* (2007), 53(4), 563-573

CODEN: NEPHBW; ISSN: 0028-3908

PUBLISHER: Elsevier B.V.

DOCUMENT TYPE: Journal

LANGUAGE: English

AB Recent evidence suggests that 5-hydroxytryptamine (5-HT)₄ receptor activity enhances cognition and provides neuroprotection. Here we report the effects of VRX-03011, a novel partial 5-HT₄ agonist, that is both potent (K_i .apprx. 30 nM) and highly selective (K_i > 5 μM for all other 5-HT receptors tested). In sep. expts., rats received VRX-03011 (0.1-10 mg/kg i.p.) 30 min prior to spontaneous alternation testing in a no-delay or a 30-s delay condition. VRX-03011 (1, 5 and 10 mg/kg, but not 0.1 mg/kg) significantly enhanced delayed spontaneous alternation performance

while none of the doses enhanced performance in the no-delay test. VRX-03011 (1 and 5 mg/kg) concomitantly enhanced hippocampal acetylcholine output and delayed spontaneous alternation scores compared to that of vehicle controls, but had no effect on hippocampal acetylcholine release under a resting condition. Moreover, suboptimal doses of VRX-03011 and the acetylcholinesterase inhibitor galanthamine combined to enhance memory. VRX-03011 also regulated amyloid precursor protein (APP) metabolism by inducing a concentration-dependent increase in the non-amyloidogenic soluble form of APP (sAPP α) with an EC50 .apprx. 1-10 nM. VRX-03011 had no effect on contractile properties in guinea pig ileum or colon prepns. with an EC50 > 10 μ M and did not alter rat intestinal transit at doses up to 10 mg/kg. These findings suggest that VRX-03011 may represent a novel treatment for Alzheimer's disease that reduces cognitive impairments and provides neuroprotection without gastrointestinal side effects.

OS.CITING REF COUNT: 16 THERE ARE 16 CAPLUS RECORDS THAT CITE THIS RECORD (16 CITINGS)
REFERENCE COUNT: 47 THERE ARE 47 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L6 ANSWER 6 OF 11 CAPLUS COPYRIGHT 2010 ACS on STN

ACCESSION NUMBER: 2006:631165 CAPLUS

DOCUMENT NUMBER: 145:110313

TITLE: Pharmaceutical compositions comprising an agent with serotonin receptor modulating activity for sleep disorders

INVENTOR(S): Rariy, Roman V.; Heffernan, Michael

PATENT ASSIGNEE(S): Collegium Pharmaceutical, Inc., USA

SOURCE: PCT Int. Appl., 57 pp.

CODEN: PIXXD2

DOCUMENT TYPE: Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2006069030	A1	20060629	WO 2005-US46049	20051220
W: AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BW, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, EG, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KM, KN, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, LY, MA, MD, MG, MK, MN, MW, MX, MZ, NA, NG, NI, NO, NZ, OM, PG, PH, PL, PT, RO, RU, SC, SD, SE, SG, SK, SL, SM, SY, TJ, TM, TN, TR, TT, TZ, UA, UG, US, UZ, VC, VN, YU, ZA, ZM, ZW				
RW: AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, HU, IE, IS, IT, LT, LU, LV, MC, NL, PL, PT, RO, SE, SI, SK, TR, BF, BJ, CF, CG, CI, CM, GA, GN, GQ, GW, ML, MR, NE, SN, TD, TG, BW, GH, GM, KE, LS, MW, MZ, NA, SD, SL, SZ, TZ, UG, ZM, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM				
AU 2005319367	A1	20060629	AU 2005-319367	20051220
CA 2590802	A1	20060629	CA 2005-2590802	20051220
EP 1833467	A1	20070919	EP 2005-854713	20051220
R: AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, HU, IE, IS, IT, LI, LT, LU, LV, MC, NL, PL, PT, RO, SE, SI, SK, TR				
JP 2008524332	T	20080710	JP 2007-548372	20051220
US 20080200508	A1	20080821	US 2007-793392	20070619
CN 101132777	A	20080227	CN 2005-80043729	20070620
IN 2007DN04915	A	20070817	IN 2007-DN4915	20070626
KR 2007087678	A	20070828	KR 2007-7016730	20070720
PRIORITY APPLN. INFO.:			US 2004-637655P	P 20041220
			WO 2005-US46049	W 20051220

ASSIGNMENT HISTORY FOR US PATENT AVAILABLE IN LSUS DISPLAY FORMAT

AB Pharmaceutical compns. are provided for the pharmacol. treatment of breathing disorders and, more specifically, to compns. containing agents having serotonin receptor modulating activity for the alleviation of sleep apnea (central and obstructive) and other sleep-related breathing disorders wherein the active ingredients are released such as to extend effective blood plasma concns. across the period of sleep. For example, ondansetron immediate release tablets were prepared containing ondansetron HCl dihydrate 9.98 mg, lactose 29.14 mg, Prosolv 50 29.14 mg, Ac-Di-Sol 3.75 mg, SDS 1.5 mg, Aerosil 0.75 mg, and Mg stearate 0.75 mg. Ondansetron immediate release tablets were then coated with Eudragit L100/S100 blend to obtain delayed release tablets.

REFERENCE COUNT: 2 THERE ARE 2 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L6 ANSWER 7 OF 11 CAPLUS COPYRIGHT 2010 ACS on STN

ACCESSION NUMBER: 2005:258583 CAPLUS

DOCUMENT NUMBER: 142:285255

TITLE: Buccal formulations of galanthamine and derivatives and use for treating Alzheimer's disease, and the abuse of alcohol and drugs

INVENTOR(S): Asmussen, Bodo; Moormann, Joachim

PATENT ASSIGNEE(S): HF Arzneimittelforschung GmbH, Germany

SOURCE: Ger. Offen., 9 pp.

CODEN: GWXXBX

DOCUMENT TYPE: Patent

LANGUAGE: German

FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
DE 10338544	A1	20050324	DE 2003-10338544	20030819
AU 2004273574	A1	20050331	AU 2004-273574	20040423
AU 2004273574	B2	20100513		
CA 2536499	A1	20050331	CA 2004-2536499	20040423
WO 2005027870	A1	20050331	WO 2004-EP4325	20040423
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RW: BW, GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZM, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM, AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, HU, IE, IT, LU, MC, NL, PL, PT, RO, SE, SI, SK, TR, BF, BJ, CF, CG, CI, CM, GA, GN, GQ, GW, ML, MR, NE, SN, TD, TG				
EP 1656112	A1	20060517	EP 2004-729066	20040423
EP 1656112	B1	20100210		
R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT, IE, SI, FI, RO, CY, TR, BG, CZ, EE, HU, PL, SK				
JP 2007509031	T	20070412	JP 2006-523531	20040423
NZ 545560	A	20091127	NZ 2004-545560	20040423
AT 457164	T	20100215	AT 2004-729066	20040423
ES 2340164	T3	20100531	ES 2004-729066	20040423
US 20070190117	A1	20070816	US 2006-569160	20061017
PRIORITY APPLN. INFO.:			DE 2003-10338544	A 20030819
			WO 2004-EP4325	W 20040423

ASSIGNMENT HISTORY FOR US PATENT AVAILABLE IN LSUS DISPLAY FORMAT

AB The invention concerns film-shaped buccal formulations of galanthamine, its salts and derivs. as central nervous system

cholinergic drug or a combination of two of these drugs. The drug is embedded in polymeric matrix layers; the film can be mucus-adhesive or not adhering to the mucus. Controlled-release formulations are prepared The buccal delivery systems is used to treat Alzheimer's disease, the abuse of alc. and drugs, as antidote for neuroleptic anesthesia, and nervous system drug.

OS.CITING REF COUNT: 1 THERE ARE 1 CAPLUS RECORDS THAT CITE THIS RECORD (1 CITINGS)
 REFERENCE COUNT: 5 THERE ARE 5 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L6 ANSWER 8 OF 11 CAPLUS COPYRIGHT 2010 ACS on STN

ACCESSION NUMBER: 2001:152471 CAPLUS
 DOCUMENT NUMBER: 134:198101
 TITLE: Delayed-release pharmaceutical formulations containing acrylic polymers
 INVENTOR(S): Andina, Christian; Fanning, Niall; Palmer, Fiona; Stark, Paul
 PATENT ASSIGNEE(S): Elan Corporation, Plc., Ire.
 SOURCE: PCT Int. Appl., 38 pp.
 CODEN: PIXXD2
 DOCUMENT TYPE: Patent
 LANGUAGE: English
 FAMILY ACC. NUM. COUNT: 1
 PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2001013898	A2	20010301	WO 2000-GB3309	20000829
WO 2001013898	A3	20010525		
W:	AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH, CN, CR, CU, CZ, DE, DK, DM, DZ, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ, NO, NZ, PL, PT, RO, RU, SD, SE, SG, SI, SK, SL, TJ, TM, TR, TT, TZ, UA, UG, US, UZ, VN, YU, ZA, ZW			
RW:	GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZW, AT, BE, CH, CY, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, BF, BJ, CF, CG, CI, CM, GA, GN, GW, ML, MR, NE, SN, TD, TG			
CA 2380333	A1	20010301	CA 2000-2380333	20000829
AU 2000067156	A	20010319	AU 2000-67156	20000829
EP 1206250	A2	20020522	EP 2000-954802	20000829
R:	AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT, IE, SI, LT, LV, FI, RO, MK, CY, AL			
JP 2003507416	T	20030225	JP 2001-518036	20000829
PRIORITY APPLN. INFO.:			US 1999-150880P	P 19990826
			US 1999-150891P	P 19990826
			US 1999-151221P	P 19990826
			WO 2000-GB3309	W 20000829

AB The application discloses novel pharmaceutical formulations adapted for delaying the release of a pharmaceutically active agent. A delayed-release drug formulation encapsulates the drug, which may be applied to microparticles or in tableted form, in a release-delaying coat comprising polymeric materials of predetd. swelling/permeability characteristics. In particular, acrylate and/or acrylic acid polymer blends modified with ionic groups may be used. One preferred embodiment uses a polymer of pH dependent permeability as a more permeable element of the coat. The delayed-release formulations are deployed in a single dosage form together with instant release or sustained release formulations, so that a unit dosage form, preferably an oral dosage form, can effectively administer 2 doses to a patient at different times. Thus, sustained

release minitablets were formulated and encapsulated into hard gelatin capsules by using rivastigmine HTA 4.8, Methocel K100LV 14.0, Avicel PH101 15.3, Aerosil-200 0.5, and Mg stearate 0.4 mg/capsule.

OS.CITING REF COUNT: 3 THERE ARE 3 CAPLUS RECORDS THAT CITE THIS RECORD (3 CITINGS)
REFERENCE COUNT: 4 THERE ARE 4 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L6 ANSWER 9 OF 11 CAPLUS COPYRIGHT 2010 ACS on STN

ACCESSION NUMBER: 2000:880940 CAPLUS
DOCUMENT NUMBER: 134:46786
TITLE: Delayed total release two pulse gastrointestinal drug delivery system
INVENTOR(S): Penhasi, Adel; Flashner, Moshe; Lerner, E. Itzhak
PATENT ASSIGNEE(S): Perio Products Ltd., Israel
SOURCE: PCT Int. Appl., 96 pp.
CODEN: PIXXD2
DOCUMENT TYPE: Patent
LANGUAGE: English
FAMILY ACC. NUM. COUNT: 1
PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2000074655	A2	20001214	WO 2000-US15185	20000602
WO 2000074655	A3	20010830		
W:	AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, CA, CH, CN, CR, CU, CZ, DE, DK, DM, DZ, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ, NO, NZ, PL, PT, RO, RU, SD, SE, SG, SI, SK, SL, TJ, TM, TR, TT, TZ, UA, UG, US, UZ, VN, YU, ZA, ZW			
RW:	GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZW, AT, BE, CH, CY, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, BF, BJ, CF, CG, CI, CM, GA, GN, GW, ML, MR, NE, SN, TD, TG			
US 20020110593	A1	20020815	US 1999-325748	19990604
US 6632451	B2	20031014		
CA 2375714	A1	20001214	CA 2000-2375714	20000602
CA 2375714	C	20081007		
EP 1189601	A2	20020327	EP 2000-939503	20000602
EP 1189601	B1	20041222		
R:	AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT, IE, SI, LT, LV, FI, RO			
AT 285228	T	20050115	AT 2000-939503	20000602
AU 780141	B2	20050303	AU 2000-54582	20000602
IL 146708	A	20080605	IL 2000-146708	20000602
PRIORITY APPLN. INFO.:			US 1999-325748	A 19990604
			WO 2000-US15185	W 20000602

ASSIGNMENT HISTORY FOR US PATENT AVAILABLE IN LSUS DISPLAY FORMAT

AB A two pulse gastrointestinal delivery system is provided. The system comprises a desired agent in combination with a swellable core material, the core being surrounded by an inner coat of a water-insol. or relatively water-insol. coating material in which particulate water-insol. material is embedded. The inner coat is addnl. surrounded by an outer coat that contains addnl. amts. of the desired agent. When the delivery device enters the gastrointestinal tract, the outer coat releases the desired agent contained therein and disintegrates, exposing the inner coat. The particulate matter in the inner coat takes up liquid, thus forming channels interconnecting the drug-containing core with the outside of the delivery device. Through these channels liquid enters the core which then swells to the point at which the inner coat is broken. When the integrity of the inner coat is destroyed, the core then disintegrates, immediately

releasing all or most of the drug at a specific site. By controlling parameters in the device, such as the core material, carrier material in the coating, and particulate matter, the location of release of both pulses of the drug can be carefully controlled. The invention is also directed to a method of using the device for the treatment of disease by the release of drugs in the gastrointestinal tract in a location- and time-dependent manner. A tablet core was prepared from Ca pectinate 59, Emcocel 20, crosslinked PVP 10, Na diclofenac 10, and Mg stearate 1%.

OS.CITING REF COUNT: 11 THERE ARE 11 CAPLUS RECORDS THAT CITE THIS RECORD (11 CITINGS)
 REFERENCE COUNT: 2 THERE ARE 2 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L6 ANSWER 10 OF 11 CAPLUS COPYRIGHT 2010 ACS on STN

ACCESSION NUMBER: 2000:314578 CAPLUS

DOCUMENT NUMBER: 132:318050

TITLE: Choline esterase inhibitors, alone or with other agents, for treating restless legs syndrome and/or periodic limb movements during sleep, and diagnostic method

INVENTOR(S): Hedner, Jan; Kraiczi, Holger

PATENT ASSIGNEE(S): Swed.

SOURCE: PCT Int. Appl., 26 pp.

CODEN: PIXXD2

DOCUMENT TYPE: Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2000025821	A1	20000511	WO 1999-SE1979	19991103
RW: AT, BE, CH, CY, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE				
EP 1154795	A1	20011121	EP 1999-957453	19991103
EP 1154795	B1	20050817		
R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT, IE, FI				
AT 302025	T	20050915	AT 1999-957453	19991103
ES 2251242	T3	20060416	ES 1999-957453	19991103
PRIORITY APPLN. INFO.:			SE 1998-3760	A 19981104
			WO 1999-SE1979	W 19991103

AB A method for treating or preventing the restless legs syndrome and/or the periodic limb movements during sleep comprises administration of a choline esterase inhibitor (CEI) and, optionally, carbamazepine, clonidine, baclofen, hypnotic agent, opioid agonist, and dopaminergic agonist. Administration precedes the onset of sleep at night by from zero to three hours so as to make the CEI exert a therapeutic effect during a major portion of the sleep period. Also disclosed are corresponding pharmaceutical comps. and their use, including comps. comprising a combination of CEI with carbamazepine, clonidine, baclofen, hypnotic agent, opioid agonist, and dopaminergic agonist.

OS.CITING REF COUNT: 3 THERE ARE 3 CAPLUS RECORDS THAT CITE THIS RECORD (4 CITINGS)

REFERENCE COUNT: 7 THERE ARE 7 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L6 ANSWER 11 OF 11 CAPLUS COPYRIGHT 2010 ACS on STN

ACCESSION NUMBER: 1999:252855 CAPLUS

DOCUMENT NUMBER: 131:111271

TITLE: Further studies on Nivalin P-induced changes in muscle fiber membrane processes

AUTHOR(S): Radicheva, N.; Mileva, K.; Stoyanova, N.; Georgieva, B.
CORPORATE SOURCE: Institute of Biophysics, Bulgarian Academy of Sciences, Sofia, Bulg.
SOURCE: Methods and Findings in Experimental and Clinical Pharmacology (1999), 21(1), 5-10
CODEN: MFEPDX; ISSN: 0379-0355
PUBLISHER: Prous Science
DOCUMENT TYPE: Journal
LANGUAGE: English

AB Nivalin P, composed of Nivalin (galanthamine hydrobromide) and Pimadin (4-aminopyridine hydrochloride), was applied extracellularly to isolated skeletal muscle fibers during prolonged activity (fatiguing) to better understand the effects of the drug on membrane ionic processes. Changes in intracellular action potential (ICAP) and twitch (Tw) parameters were monitored from treated and untreated fibers during uninterrupted activity (endurance time, ET) produced by repetitive stimulation every 200 ms for 3 min. Nivalin P-induced a shortening of the ET, drastic changes in repolarization of the ICAP corresponding to changes in neg. after-potential and falling area and an initial increase of the Tw amplitude and duration. These results suggest that Nivalin P: (i) inhibits the Na⁺,K⁺-pump due to nonspecific reduction of Na⁺ influx, stimulates the Na⁺-Ca²⁺ exchanger and inhibits K⁺ conductance: (ii) increases Ca²⁺ release and delays Ca²⁺ uptake under sufficient depolarization. It was concluded that fatigue develops faster in the presence of Nivalin P.

OS.CITING REF COUNT: 3 THERE ARE 3 CAPLUS RECORDS THAT CITE THIS RECORD (3 CITINGS)
REFERENCE COUNT: 25 THERE ARE 25 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

=> d his

(FILE 'HOME' ENTERED AT 12:35:52 ON 17 DEC 2010)

FILE 'MEDLINE, EMBASE, BIOSIS' ENTERED AT 12:36:12 ON 17 DEC 2010

L1 7153 S (RIVASTIGMINE OR GALANTHAMINE OR LYCORAMINE)
L2 13 S L1 AND ((DELAY?)(S)(RELEASE?) OR (PROGRAM?)(S)(RELEASE?))
L3 7 DUP REM L2 (6 DUPLICATES REMOVED)

FILE 'CAPLUS' ENTERED AT 12:38:56 ON 17 DEC 2010

L4 2240 S (RIVASTIGMINE OR GALANTHAMINE OR LYCORAMINE)
L5 11 S L4 AND ((DELAY?)(S)(RELEASE?) OR (PROGRAM?)(S)(RELEASE?))
L6 11 DUP REM L5 (0 DUPLICATES REMOVED)

=>

---Logging off of STN---

=>

Executing the logoff script...

=> LOG Y

COST IN U.S. DOLLARS	SINCE FILE ENTRY	TOTAL SESSION
FULL ESTIMATED COST	52.27	71.93

DISCOUNT AMOUNTS (FOR QUALIFYING ACCOUNTS)	SINCE FILE ENTRY	TOTAL SESSION
CA SUBSCRIBER PRICE	-9.35	-9.35

STN INTERNATIONAL LOGOFF AT 12:41:26 ON 17 DEC 2010